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## **CALIFORNIA FORM** FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS

Date Received Official Use Only

ADDRESS

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Candidate

A Public Document

GOVERNOR'S OFFICE LEGAL AFFAIRS

NAME (LAST)	(FIRST)	(MIDDLE)		DAYTIME TELEPHONE NUMBER
Portillo	Luis			
MAILING ADDRESS STREET (May use business address)	CITY	STATE	ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRES
Office of the Governor, State Capito	ol Sacramento	CA	95814	
1. Office, Agency, or Court		4. Schedu	le Summa	ıry
Name of Office, Agency, or Court:		→ Total number of pages including this cover page:1		
Office of the Governor				
Division, Board, District, if applicable:		➡ Check app	licable sched	lules or "No reportable
Constituent Affairs		interests."		
Your Position:		I have disclosed interests on one or more of the attached schedules:		
Director			_	
→ If filing for multiple positions, list additional agency(ies)/		Schedule A-1  Yes – schedule attached Investments (Less than 10% Ownership)		
position(s): (Attach a separate s	heet if necessary.)	Schedule A	-2 ☐ Yes -	schedule attached
Agency:		Investments	(10% or greater O	wnership)
Position:		Schedule B Real Propert		schedule attached
2. Jurisdiction of Office (Check at least one box)		Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)		
		Schedule D	☐ Yes -	schedule attached
County of		Income – Gii	fts	
City of		Schedule E	☐ Yes -	schedule attached
Multi-County	•	Income – Tra	ivel Payments	
Other	Α		-0	r-
3. Type of Statement (Check	to ad least one book	✓ No report	rtable interest	s on any schedule
3. Type of Statement (Check	( at least one box)			
Assuming Office/Initial Date	:/	5. Verificat	ion	
🔀 Annual: The period covered is Ja	anuary 1, 2007,			le diligence in preparing this
through December 31, 2007.				this statement and to the best of
-or-	, dhaarah			ion contained herein and in any
O The period covered is/_ December 31, 2007.	, through	attached sche		PERSONAL PROPERTY - *PROPERTY - **
Leaving Office Date Left:	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
O The period covered is January	1, 2007, through the			03-04-08
date of leaving office.		Date Signe		
O The period covered is/_	/ through			
the date of leaving office		Signature _		

FPPC Form 700 (2007/2008) FPPC Toll-Free Helpline: 866/ASK-FPPC